U.S. DEPARTMENT OF TRANSPORTATION DRUG AND ALCOHOL TESTING MIS DATA COLLECTION FORM

Calender Year Covered by this Report: 2009

	ployer										0) (0.0							
	mpany Name: <u>DEPARTMEN</u>		RKS	AND R	RECR	<u>EATION,</u>	LAW E	NFO	RCE. &	<u>EMER.</u>	SVCS	S. DIV.		-				
	ng Business As (DBA) Name (if applie							4	·········									
	dress:								E-mai	1:								
	me of Certifying Official: SYI		NEY PERRY Signature: Date Certified:															
						Dat	e Certifi	ed: _		2010								
		LOWE									***) 324-93						
	'PA Name and Telephone (if applicable					ERSONN						<u>) 322-03</u>			.			
	k the DOT agency for which you a	-	_		· ·	-								MEO	NO			
	CSA - Motor Carrier: DOT #:											Exempt: (c	ircle one)	YES	or NO			
—FA	A - Aviation: Certificate # (if applicabl SHA - Pipeline: (Check) Gas Gatherin	e):				Can Die	Plai	n/Reg	gistration #	(ii appi	icabie):	- -	Transport C	arkan Dia	wide.			
	A - Railroad: Total Number of observe										ıs Liquit	.s — 1	Tansport	arbon Dio	xiue			
				1219 K							-	(If mor	e than one	reasol list	- compressols			
	CG - Maritime: Vessel ID # (USCG- or A - Transit	State-1880	eu).									(11 11101	e man one	vessei, iist	. ѕерагалегу			
_	vered Employees: (A) Enter Tota	l Number	r Safet	tv-Sens	itive l	Employee	s In All	Empl	ovee Cat	egories	•			12				
				.y .D¢.1.3		- inproject	<u> </u>	Ziii pi	oyee car	egor ies	•							
(B) Ei	nter Total Number of Employee (Categories	s:	L		1												
(C)	Employee Category		,	Total N	umbei	r of Employ	vees		If you ha	ve multip	ole emplo	yee categor	ies, complet	e Sections !	[
	Employee Category					Category			1 `		(B). Take that filled-in form and make one copy loyee category and complete Sections II (C), III,							
	Crew					12			1			y and compi mployee cat		II (C), III,				
											-							
III. D	rug Testing Data:																	
Г		1 1		2	3	4	5	6	7	8	9	10	11	12	13			
		# = .;	.									Refusa	l Results					
		f Tes equa	12]	.		١	L L	L L	١	Positive for Amphetamines			, TR	ပ	afts			
		er O	and	ativ	itive	ve fo	re fo	e fo	ve fo	ve fo	etam	1_	ler" fedic	Isal J	Resu			
		lumb [Shc	= ;	Verfied Negative Results Verfied Positive	Pos	Positive for Marijuana	Positive for Cocaine	Positive for PCP	Positive for Opiates	Positive for Amphetami	ositiv mph	tuted	Slade No No	Refu it To g	[] lied			
_		Total Number Of Test Results [Should equal the sum of columns 2,	3, 9, 10, 11, and 12]	Verfied Results	Verfied Positive Results	ă Z	ă O	~ ~	, A O	ΡĀ	Adulterated	Substituted	"Shy Bladder" ~ With No Medical Explanation	Other Refusal To Submit To Testing	Cancelled Results			
Type of Test		Re To	3,5		Ve Re						∢	\overline{\sigma}	1, 1≷ E	OST	<u>ي</u>			
Pre	-Employment		7	7	(0	0		0 0	0	0	0	0	0	0			
Rai	ndom		5	5	(0	0		0 0	0	0	0	0	0	0			
Pos	st-Accident		0	0	(0	0		0 0	0	0	0	0	0	0			
Re	asonable Susp./Cause	1	0	0		0 0	0		0 0	0	0	1 0	0	0	0			
-	turn-to-Duty		0	0		<u> </u>	0		0 0	0	0	0	0	0	0			
ļ.:		 						ļ			 							
Follow-Up			0	0	(0	0	'	0	0	0	0	0	0	0			
ТО	TAL	12	2	12	0	0	0	(0	0	0	0	0	0	0			
IV. Al	cohol Testing Data				*****			I										
Г				2		3	1 4		5	1	6	7	8	9	_			
		l mg	la s			f i				ځ ا	5	Refusa	Results	†				
		of deg	· mm	ts W 0.02		r W	Fests		rests	Fests		£		ults				
		nber Tes	ည္သိ င္လာ	Tes	l	Tes 02 C	ĭon,	İ	tion ' ults (tion	<u> </u>		usal: t To	Res				
		Nur ming Its [S	and,	ning Its B		ning Its 0. ter	ber (ts	irma Resi ugh (irma	ier Ser	ung fedic anati	r Ref ubmi	elled				
	Type of Test	Total Number of Screening Test Results [Should equal	the sum of Columns 2,3,7, and 8]	Screening Tests With Results Below 0.02		Screening Tests With Results 0.02 Or Greater	Number Of Confirmation Tests	Results	Confirmation Tests With Results 0.02 Through 0.039	Confirmation Tests With Results 0.04 Or	Greater	Shy Lung ~ With No Medical Explanation	Other Refusals To Submit To	Cancelled Results				
}	Pre-Employment	1	0		0	07 == 0	<u> </u>	0		+	0	0 2 2	╂	+	0			
}	Random	1	0		0			0		-	0		+	+	0			
}	Post-Accident	 	0		0	0	\vdash	0			0	0			0			
ŀ	Reasonable Susp./Cause	 	0		0	0	!	0		+	0	0			0			
ŀ	Return-to-Duty		0		0	0		-	(0	0	-	 	0			
}	Follow-Up		0		0	0	 -	0	(+	0	0	 		0			
ŀ	TOTAL	+	0		0	0	<u> </u>	0			0	0	1	+	0			

U.S. DEPARTMENT OF TRANSPORTATION DRUG AND ALCOHOL TESTING MIS DATA COLLECTION FORM Calendar Year Covered by this Report: 2009

I.	Employer Company Name: SEE	ATTACHED LIS	ST															
	Company Name: SEE ATTACHED LIST Doing Business As (DBA) Name (if applicable):																	
	Address:		E-Mail:															
	Name of Certifying Official																	
Telephone: (916) 324-2763								Signature:										
Prepared by (if different): JULIE LOWE								Telephone: (916) 324-9386										
C/TPA Name and Telephone (if applicable): DEPT. OF PERSONNEL ADMIN.								-	-									
~1													1.		• •			
	eck the DOT agency for																	
	MCSA – Motor Carrier: DC																	
	AA – Aviation: Certificate																	
	SPA – Pipeline: (Check) Gas RA – Railroad: Total Numl	_						_			-	-	_					
	SCG – Maritime: Vessel ID																	
	FA – Transit	# (USCG- 01 St	ate-155u	.eu)						(1.	illore	nan one	vessei,	1151 50	paratery)			
		i) Enten Tetal	N TI-	£ G-	.e 0		171		All 17:		O.			170	7			
	Covered Employees: (A			i i	-	ensitive	Empl	oyees 1	n All E	mpic	yee Ca	itegorie	es:	179	,,			
(B)	Enter Total Number of	Employee Cat	egorie	s:	1													
(0)	Eleves Catago	Total	~1 NT1	er of E			r.f 1		-144-1				1-	<u> </u>	T			
(C)	Employee Categor	ry 10ta		Categoi		ss s	If you have multiple employee categories, complete Sections I and II (A) & (B). Take that filled-in form and make one copy											
					f	for each employee category and complete Sections II (C), III, and IV for each separate employee category.												
	Driver]	.797			and IV	for each	ı separa	te em	ployee	categor	у.					
III.	Drug Testing Data:	1	2	<u>3</u>	4	5	6	7	8	9		11 1sal Resu	12 Ilts		13			
		Total Number Of Test Results [Should equal the sum of columns 2, 3, 9, 10, 11, and 12]	Verified Negative Results	Verified Positive Results	Positive for Marijuana	Positive for Cocaine	Positive for PCP	Positive for Opiates	Positive for Amphetamines	Adulterated	Substituted	"Shy Bladder" – With No Medical Explanation		Testing	ancelled Kesults			
	Type of Test				+	-				1	02	* 12 11	1 0 5					
1	Pre-Employment Random	173	169	3	5	4			1	-			-		1			
ļ	Post-Accident	911	902	6	5	1	•						1	+	2			
	Reasonable Susp./Cause	0	1											+				
	Return-to-Duty	3	3		 									-				
	Follow-Up	11	11		1										\dashv			
	ΓΟΤΑL	1099	1086	9	7	1	0	0	1	0	0	0	1		3			
IV.	Alcohol Testing Data:	1	2		3	4	 	5	6		7		8	9				
		f f									Refusal Resu		ults					
	Type of Test	Total Number of Screening Test Results [Should equal the sum of Columns 2, 3, 7, and 8]	Screening Tests With Results	Below 0.02 Screening Tests	With Results 0.02 Or Greater	Number of Confirmation Tests Results	Confirmation Tests With	Results 0.02 Through 0.039	Confirmation Tests With Results 0.04 or Greater		Shy Lung – With No Medical Explanation Other Refusals		Outer Netusals to Submit to Testing	to Submit to Testing Cancelled Results				
Pre-Employment		1	1															
	Random	191	19	1														
	Post-Accident	0																
	Reasonable Susp./Cause	0																
L	Return-to-Duty	0												<u> </u>	_			
1	Follow-Up	3	3	1														

TOTAL

FHWA Drug Testing MIS Data Collection Form

Companies Included in this Report: From page 1 of FHWA Drug Testing MIS Data Collection Form

Consortium/Primary Company:

Address: BENEFITS DIVISION, 1515 S STREET, NORTH BLDG.,

STE. 400

City: CA

SACRAMENTO

State:

Telephone No.: (916) 324-2763 Contact:

Sydney Perry

Zip Code:

95811-7258

Company List:

Company Name Street Address/P.O. Box

Telephone No. Fax No.

AIR RESOURCES BOARD

ADMINISTRATIVE SERVICES DIVISION

P.O. BOX 2815

SACRAMENTO, CA 95812

Phone: (916) 322-8213

Fax: (916) 322-9074

CALIFORNIA CONSERVATION CORPS

HUMAN RESOURCES BRANCH

1719 24TH STREET

Fax:

Phone: (916) 341-3195 (916) 324-3454

SACRAMENTO, CA 95816

CALIFORNIA DEPARTMENT OF EDUCATION

LABOR RELATIONS

1430 N STREET, SUITE 1802

SACRAMENTO, CA 95814

Phone: (916) 319-0898 Fax:

(916) 319-0184

DEPARTMENT OF FORESTRY

LABOR RELATIONS

P. O. BOX 944246

SACRAMENTO, CA 942442460

Phone: (916) 327-7270 (916) 324-5550

CALIFORNIA HIGHWAY PATROL **COMMERCIAL VEHICLES SECTION - 062**

444 N. THIRD STREET, SUITE 310

SACRAMENTO, CA 95811

Phone: (916) 445-1865

(916) 446-4579

DEPARTMENT OF CONSUMER AFFAIRS

HUMAN RESOURCES/SPECIAL PROJECTS UNIT

1625 NORTH MARKET BOULEVARD, SUITE N321

SACRAMENTO, CA 95834

Fax:

Fax:

Phone: (916) 574-8326 (916) 574-8605

DEPT. OF DEVELOPMENTAL SERVICES

LABOR RELATIONS BRANCH

1600 NINTH STREET, MAIL STATION Q

SACRAMENTO, CA 95814

Phone: (916) 322-9354

(916) 322-9188

Company List:	
Company Name Street Address/P.O. Box	Telephone No. Fax No.
City DEPT. OF FISH AND GAME	Fax No.
HUMAN RESOURCES BRANCH	
1416 NINTH STREET, ROOM 1217B	Phone: (916) 651-7652
SACRAMENTO, CA 95814	Fax: (916) 654-2493
DEPARTMENT OF GENERAL SERVICES OFFICE OF HUMAN RESOURCES 707 3RD STREET, SUITE 9-305	Phone: (916) 376-5376 Fax: (916) 376-5380
WEST SACRAMENTO, CA 95605	1 ax. (310) 370-3300
DEPARTMENT OF MENTAL HEALTH LONG TERM CARE SERVICES 1600 NINTH STREET SACRAMENTO, CA 95814	Phone: (916) 651-1399 Fax: (916) 654-2804
DED A DEMENT OF MOTOR VEHICLES	
DEPARTMENT OF MOTOR VEHICLES ADMINISTRATION	
2570 24TH STREET, MS G208	Phone: (916) 657-8565
SACRAMENTO, CA 95818	Fax: (916) 657-6733
·	
DEPARTMENT OF CORRECTIONS	
OFFICE OF EMPLOYEE WELLNESS	Dhono: (016) 227 2402
1515 S STREET, ROOM 127S	Phone: (916) 327-3492 Fax: (916) 322-7955
SACRAMENTO, CA 95814	rax. (910) 322-1933
DEPARTMENT OF PARKS AND RECREATION LAW ENFORCEMENT AND EMERGENCY SERVICES DIVISION	
1416 NINTH STREET, ROOM 1431	Phone: (916) 653-3535
SACRAMENTO, CA 95814	Fax: (916) 653-7866
DEPARTMENT OF VETERANS AFFAIRS	
HUMAN RESOURCES 1227 O STREET, ROOM 402	Phone: (916) 653-2178
SACRAMENTO, CA 95814	Fax: (916) 653-1960
ONOTO WILLIAM O, ON SOCIA	(0.12)
DEPARTMENT OF WATER RESOURCES PERSONNEL	
1416 NINTH STREET, ROOM 305	Phone: (916) 651-6851
SACRAMENTO, CA 95814	Fax: (916) 653-9629
DEPARTMENT OF THE YOUTH AUTHORITY OFFICE OF EMPLOYEE WELLNESS	7) (0.10) 007 0.100
1515 S STREET, ROOM 127 S	Phone: (916) 327-3492
SACRAMENTO, CA 95814	Fax: (916) 322-7955
FRANCHISE TAX BOARD HUMAN RESOURCES BUREAU, MS A-170	Phone: (916) 845-5154
P.O. BOX 550 SACRAMENTO, CA 958270550	Fax: (916) 845-0994
Or to the living of the object	· · · · · · · · · · · · · · · · · · ·

Company List:

Company Name							
Street Address/P.O. Box	Telephone No.						
City	Fax No.						
MILITARY							
STATE PERSONNEL PROGRAMS, BOX 27							
P.O. BOX 269101	Phone: (916) 854-3680						
SACRAMENTO, CA 958269101	Fax: (916) 854-3647						
DEPARTMENT OF FOOD AND AGRICULTURE							
22ND DAA/FAIRGROUNDS/RACETRACK							
2260 JIMMY DURANTE BOULEVARD	Phone: (858) 792-4215						
DEL MAR, CA 92014	Fax: (858) 792-4246						